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		Express Mail No.	EV332068210US
DECLARATION FOR UTILITY, DESIGN, DIVISIONAL AND CONTINUATION-IN-PART PATENT APPLICATIONS (37 CFR 1.63)		Attorney Docket Number	42173-011
		First Named Inventor	Wang, Shaupoh et al.
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing		COMPLETE IF KNOWN	
<input type="checkbox"/> Supplemental Declaration Submitted	<input type="checkbox"/> Declaration Submitted for Continuation-In- Part Filing	<input type="checkbox"/> Declaration Submitted for Divisional Filing	Application Number
			Filing Date
			Group Art Unit
			Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR ELECTROSTATIC SPRAY

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

08/06/2002

as United States Application Number or PCT International

Application Number

60/401,563

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FFFS OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22304-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒Customer Number
or Bar Code Label

029493

OR ☐

Correspondence address below

Name **Grant D. Kang**Address **Husch & Eppenberger, LLC, 190 Carondelet Plaza**City **St. Louis**State **MO**ZIP **63105**Country **USA**Telephone **314-480-1500**Fax **314-480-1505**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

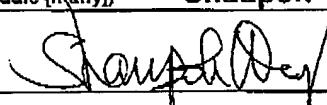
Given Name

(first and middle [if any])

Shaupoh

Family Name

or Surname

WangInventor's
Signature

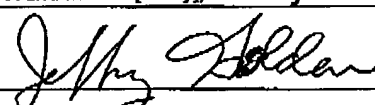
Date

August 1, 2003Residence Mailing Address: **104 Brighthurst Drive**

Residence City:

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NAME OF SECOND INVENTOR :

☐ A petition has been filed for this unsigned inventorGiven Name (first and middle [if any]): **Jeffry**Family Name or Surname: **Golden**Inventor's
Signature

Date

8-1-03Residence Mailing Address: **12919 Wallingshire Court**Residence City: **Creve Coeur**State: **MO**Country: **USA**Citizenship: **USA**Mailing Address: **12919 Wallingshire Court**City: **Creve Coeur**State: **MO**ZIP: **63141**Country: **USA**☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first, middle if any): Christopher G.		Family or surname: Kocher	
Inventor's Signature: <i>Christopher G. Kocher</i>		Date: <i>1 August 2003</i>	
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City: Belleville	State: IL	ZIP: 62220	Country: USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first, middle if any):		Given Name (first, middle if any):	
Inventor's Signature		Date:	
Residence Mailing Address:			
Residence City:	State:	Country:	Citizenship:
Mailing Address:			
City:	State:	ZIP:	Country:
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first, middle if any):		Given Name (first, middle if any):	
Inventor's Signature		Date:	
Residence Mailing Address:			
Residence City:	State:	Country:	Citizenship:
Mailing Address:			
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